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Bib Data Sheet

CONFIRMATION NO. 9282

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|--|---|------------------------------------|---|--|--------------------------------|
| SERIAL NUMBER 10/055,673 | FILING DATE 01/22/2002 RULE | CLASS 623 | GROUP ART UNIT 3738 | ATTORNEY DOCKET NO. T9376.DIV1 | |
| APPLICANTS Peter Pal Varga, Budapest, HUNGARY; James A. Ogilvie, Edina, MN; | | | | | |
| ** CONTINUING DATA ***** THIS APPLICATION IS A DIV OF 09/592,072 06/12/2000 <i>with</i> | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 02/15/2002 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY HUNGARY | SHEETS DRAWING 4 | TOTAL CLAIMS 25 | INDEPENDENT CLAIMS 4 |
| ADDRESS 20449 | | | | | |
| TITLE Intervertebral spacing implant system | | | | | |
| FILING FEE RECEIVED 457 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |